

NORTHERN NEVADA ADULT MENTAL HEALTH SERVICES
POLICY AND PROCEDURE DIRECTIVE

SUBJECT: PLAN FOR DELIVERY OF SOCIAL SERVICES

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APPROVAL: Rosalyn Reynolds {s}, Agency Director

I. PURPOSE

The purpose of this directive is to describe the plan and philosophy of care for delivery of inpatient and Psychiatric Evaluation Services social services at Northern Nevada Adult Mental Health Services (NNAMHS).

II. POLICY

It is the policy of the Social Services Department to be available to all inpatients at the NNAMHS.

III. STAFF COMPOSITION

1. The Social Services Department will be properly staffed with Clinical Social Workers in order to meet the needs of the inpatient and PES population. Social Workers for inpatient services will meet either Clinical Social Worker I or II qualifications established by the State of Nevada, Office of Personnel. Graduate students from a certified school of Social Work, who are assigned here for training, will be supervised by a staff clinical social worker from NNAMHS.

2. Social service staff are members of the multidisciplinary treatment team that provides services to all inpatients and PES patients. Staff will meet with consumers to address psychosocial assessments, treatment planning, implementation of the plan and discharge planning with appropriate referrals and coordination of outpatient services.

IV. DELIVERY AND SCOPE OF SERVICES

1. The Director of Social Services or his/her designee will assign a licensed clinical social worker (LCSW) and/or an LCSW intern under supervision of the director, to each consumer. The consumer, family, and/or significant other will be introduced to the social services staff. Consumer orientation will include, but is not limited to an explanation of the social service function in the consumer care, explanation of the treatment team process, group schedules and the role of the social worker in therapy, consumer care and discharge planning.

V. PROCEDURE

1. Every consumer will be assigned a specific social worker at the time of admission who will be a member of a treatment team that will develop and implement individualized treatment plans designed to meet the consumer's needs.
2. Specific social work services will be provided on the basis of needs identified by the consumer, social worker, and other members of the clinical treatment team. These services will include, but are not limited to, completing a comprehensive psychosocial assessment and discharge plan, making aftercare referrals for follow-up treatment, and participating in individual, group, and family therapies as considered necessary or appropriate by the treatment team, as well as crisis intervention.

3. Psychosocial data will be gathered through personal contacts with families when possible and other informed sources at the hospital and in the community. Phone calls or letters may be used if the consumer consents.
4. Ongoing contacts with families and community resources will be established and maintained through telephone conversations, written communications, and personal contacts at the hospital or in the community.
5. Social Workers will document consumer contacts, family contacts, community resource contacts and related activities in accordance with hospital guidelines as contained in Reference 2.
6. The Social Service department will maintain privacy while interviewing and for counseling and therapy.
7. New employees will receive orientation and training under the direction of the Social Services Department during the first week of hire as it relates to their work as a clinical social worker at the NNAMHS. Additional training and education is also available.
8. The Director of Social Services will assure that a Performance Improvement is in effect. The Performance Improvement system will be composed of the following:
 - a. Monitoring and evaluating of Social Worker's documentation for timeliness and quality of content and services provided. Examples of areas of Social Work monitoring include, but are not limited to:
 - (i) Psychosocial assessment
 - (ii) Discharge planning
 - (iii) Treatment plans
 - (iv) Problem list
 - (v) Progress notes
 - b. Monitoring tools will be used to identify areas needing improvement.

- c. Corrective action will be taken by the Director to improve areas of identified social worker's weaknesses. This will be documented and remain in the Director of Social Service's office.
- 9. All social workers are required to provide adequate documentation in the medical record, as required by State/Federal regulations pertaining to Social Services. At a minimum the following must be documented:
 - a. Initial discharge plans of the consumer
 - b. Problem list entry as needed
 - c. Treatment plan entry
 - d. Comprehensive psychosocial assessment
 - e. Social Work progress notes
 - f. Comprehensive discharge plan
- 10. All social workers will be actively involved in the patient treatment process and document such activity on the treatment plan.
- 11. The individual social worker for each treatment team will also act as the official discharge planner, and document discharge progress. A comprehensive discharge plan will be coordinated with the consumer, and documented on the Comprehensive Aftercare Plan (MR-1-4).
- 12. The social worker will act as the consumer's advocate and liaison in order to assure protection of individual rights and dignity. The Social Services Department will abide by all NNAMHS Policy and Procedures and State and Federal regulations as they relate to confidentiality and consumers rights.